ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION		7059	8/31
O.I.P.E. CLASSIFIER			9/2
FORMALITY REVIEW	59523		9-9-99
	59523		10-3-99

INDEX OF CLAIMS

✓ .... Rejected
= .... Allowed
— (Through numeral)... Canceled
÷ .... Restricted

N .... Non-elected
I .... Interference
A .... Appeal
O .... Objected

Claim		Date									
Final	Original										
	1	✓	✓	✓							
	2	✓									
	3	✓									
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Claim		Date									
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If more than 150 claims or 10 actions
staple additional sheet here

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